POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*(signature)*		1/28
O.I.P.E. CLASSIFIER		43	2/10/00
FORMALITY REVIEW		7143)	2/23/00
RESPONSE FORMALITY REVIEW			
			4/26/00

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim		Date		Claim		Date		Claim		Date
Final	Original			Final	Original			Final	Original	
	1	✓ ✓			51				101	
	2	✓ ✓			52				102	
	3	✓ ✓			53				103	
	4	✓ ✓			54				104	
	5	✓ ✓			55				105	
	6	✓ ✓			56				106	
	7	✓ ✓			57				107	
	8	✓ ✓			58				108	
	9	✓ ✓			59				109	
	10	✓ ✓			60				110	
	11	✓ ✓			61				111	
	12	✓ ✓			62				112	
	13	✓ ✓			63				113	
	14	✓ ✓			64				114	
	15	✓ ✓			65				115	
	16	✓ ✓			66				116	
	17	✓ ✓			67				117	
	18	✓ ✓			68				118	
	19	✓ ✓			69				119	
	20	✓ ✓			70				120	
	21	✓ ✓			71				121	
	22	✓ ✓			72				122	
	23	✓ ✓			73				123	
	24	✓ ✓			74				124	
	25	✓			75				125	
	26	✓			76				126	
	27	✓			77				127	
	28	✓			78				128	
	29	✓			79				129	
	30	✓ ✓			80				130	
	31	✓ ✓			81				131	
	32	✓ ✓			82				132	
	33	✓			83				133	
	34	✓ ✓			84				134	
	35	✓ ✓			85				135	
	36	✓ ✓			86				136	
	37	✓			87				137	
	38				88				138	
	39				89				139	
	40				90				140	
	41				91				141	
	42				92				142	
	43				93				143	
	44				94				144	
	45				95				145	
	46				96				146	
	47				97				147	
	48				98				148	
	49				99				149	
	50				100				150	

If more than 150 claims or 10 actions
staple additional sheet here

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